

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

FOR: HEALTH CARE FINANCING ADMINISTRATION

1. TRANSMITTAL NUMBER:

0 2 — 1 0

2. STATE:

OKLAHOMA

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL  
SECURITY ACT (MEDICAID)TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

04-01-02

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

42 CFR 440.157

7. FEDERAL BUDGET IMPACT:

a. FFY 2002 \$ -0-

b. FFY 2003 \$ -0-

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Attachment 3.1-A, Page 9a-2

Attachment 3.1-B, Page 9a-1

Attachment 4.19-B, Page 11

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION  
OR ATTACHMENT (If Applicable):

Same page, Revised 12-15-97, TN#98-09

Same page, Revised 12-15-97, TN#98-09

Same page, Revised 07-01-94, TN#94-18

10. SUBJECT OF AMENDMENT:

Clarification of reimbursement and,

Adding place of service as educational or employment setting to Personal Care.

11. GOVERNOR'S REVIEW (Check One):

☒ GOVERNOR'S OFFICE REPORTED NO COMMENT☐ OTHER, AS SPECIFIED:☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Mike Fogarty

14. TITLE:

Chief Executive Officer

15. DATE SUBMITTED:

6-27-02

16. RETURN TO:

Oklahoma Health Care Authority

Attn: Billie Wright

4545 N. Lincoln Blvd., Ste 124

Oklahoma City, OK 73105

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:

28 JUNE 2002

18. DATE APPROVED:

28 SEPTEMBER 2002

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL:

1 APRIL 2002

20. SIGNATURE OF REGIONAL OFFICIAL:

Sandra Hall

21. TYPED NAME:

ANDREW A. FREDRICKSON

22. TITLE:

ASSOCIATE REGIONAL ADMINISTRATOR  
DIV OF MEDICAID AND HEALTH OPERATIONS

23. REMARKS:

c: Mike Fogarty  
Jim Hancock  
Billie Wright

STATE: OKLAHOMA

**AMOUNT, DURATION AND SCOPE OF MEDICAL AND REMEDIAL CARE AND  
SERVICES PROVIDED CATEGORICALLY NEEDY**

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24.

- f. Personal care services in recipient's home, prescribed in accordance with a plan of treatment and rendered by qualified person under supervision of a R.N.

Non-Technical Medical Care is provided to patients approved by the Agency for this type of care in own home. Personal care services are provided in an educational or employment setting with prior approval. The provider is a person who is not a legally responsible relative of the client being served, and is certified as qualified to provide the services under the supervision of a R.N.

Revised 04-01-02

TN# 02-10  
Supersedes  
TN# 98-09

Approval Date 23 Sep 2002 Effective Date 1 Apr 2002

SUPERSEDES. TN- OK 98-09

STATE <u>Oklahoma</u>	A
DATE REC'D <u>28 Jun 2002</u>	
DATE APPV'D <u>23 Sep 2002</u>	
DATE EFF <u>1 Apr 2002</u>	
HCFA 179 <u>OK 02-10</u>	

STATE: OKLAHOMA

**AMOUNT, DURATION AND SCOPE OF SERVICES PROVIDED**  
**MEDICALLY NEEDY GROUP(S): ALL GROUPS**

24.

- f. Personal care services in recipient's home, prescribed in accordance with a plan of treatment and rendered by qualified person under supervision of a R.N.

Non-Technical Medical Care is provided to patients approved by the Agency for this type of care in own home. Personal care services are provided in an educational or employment setting with prior approval. The provider is a person who is not a legally responsible relative of the client being served, and is certified as qualified to provide the services under the supervision of a R.N.

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State: OKLAHOMA

**METHODS AND STANDARDS FOR ESTABLISHING PAYMENT RATES  
OTHER TYPES OF CARE**

10. Payment for non-technical medical care (personal care service)

Personal care services provided in a client's own home, employment setting, or educational setting, by an individual who is not employed by a home care agency is based on the original rate of \$5.00 per hour, minus the F.I.C.A. tax. The method and policy utilized for the periodic rate adjustments will be tied to the annual cost of living index and inflation factors and initiated upon a recommendation from the Rates and Standards committee and approved by the Agency's governing Board. In accordance with policy established July 1, 1973, the Department Human Services (DHS) pays the provider/employee and recipient/employer share of F.I.C.A. tax to the Internal Revenue Service.

Personal care services in a client's own home, employment setting or educational setting provided by a home care agency, is an amount equal to the \$5.00 per hour wage paid to the individual personal care provider plus additional administrative expenses incurred by the agency in the provision of the service. These expenses are not incurred by the individual provider since they are functions provided by the DHS for the individual provider.

Revised 04-01-02

TN# 02-10  
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TN# 94-18

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